

*COVID-19 Resources

COVID-19 Crew Safety Daily #1

Description COVID-19 Safety Form

Status Draft

Assignee

Date

Crew

Crew Foreman:

Location of Working Area:

Crew Checklist

Each employee on site must wear an appropriate mask and heavy duty gloves.

Log crew members temperature 3 times a day: start of shift, afternoon, and at the end of the day.

Name of Employee	PPE Review	Morning Temp.	Afternoon Temp.	End of Day Temp.
-	<input type="checkbox"/>			
-	<input type="checkbox"/>			
-	<input type="checkbox"/>			
-	<input type="checkbox"/>			
-	<input type="checkbox"/>			
-	<input type="checkbox"/>			
-	<input type="checkbox"/>			
-	<input type="checkbox"/>			
-	<input type="checkbox"/>			

Designated Crew

Designate at least two members of the crew to perform the following actions:

- Measure out and tape or cone off work areas six feet apart.
 - Spray, wipe down, and clean surfaces in work and break areas with a disinfecting solution.
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Crew Member 1:

Crew Member 2:

Sign Off

I certify that all information in this form.
